

Application Data Sheet

**Application Information**

Application Number::

Filing Date::

Application Type:: Divisional

Subject Matter:: Utility

CD-ROM or CDR?::

Number of CD Discs::

Number of copies of CDs::

Sequence Submission?:: Diskette and Paper

Computer Readable Form  
(CRF?):: Yes

Number of Copies of CRF:: 1

Title:: - CHEMOKINE EXPRESSED IN INFLAMED ADENOID

Attorney Docket No.: PF-0025-4 DIV

Request for Early Publication:: No

Request for Non-Publication:: No

Total Drawings Sheets:: 4

Small Entity:: ~~No~~

**Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Switzerland

Status:: Full capacity

First Name:: Karl

Middle Name:: J

Last Name:: Guegler

Name Suffix::

City of Residence:: Menlo Park

State or Province of  
Residence:: CA

Street of mailing address:: 1048 Oakland Avenue  
City of mailing address:: Menlo Park  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94025

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
First Name:: Phillip  
Middle Name:: R  
Last Name:: Hawkins  
Name Suffix::  
City of Residence:: Mountain View  
State or Province of Residence:: CA  
Street of mailing address:: 750 North Shoreline Boulevard  
#115  
City of mailing address:: Mountain View  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94043

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full capacity  
First Name:: Craig  
Middle Name:: G

Last Name:: Wilde  
Name Suffix::  
City of Residence:: Sunnyvale  
State or Province of Residence:: CA  
Street of mailing address:: 1239 Mandarin Drive  
City of mailing address:: Sunnyvale  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94087

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Deceased Inventor  
First Name:: Jeffrey  
Middle Name:: J  
Last Name:: Seilhamer  
Name Suffix::  
City of Residence:: Los Altos Hills  
State or Province of Residence:: CA  
Street of mailing address:: 12555 La Cresta  
City of mailing address:: Los Altos Hills  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94022

**Correspondence Information**

Correspondence Customer Number:: 27904

Representative Information

Representative Customer Number:: 27904

**Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**This**

**Application** Division of 09/588,044 06/05/00

09/588,044 Division of 09/203,235 12/01/98

09/203,235 Division of 08/862,607 05/23/97

08/862,607 Division of 08/352,324 12/07/94

**Foreign Priority Information**

Country:: Application Number:: Filing Date:: Priority Claimed::

**Assignee Information**

Assignee name:: Incyte Corporation

Street of mailing address:: 3160 Porter Drive

City of mailing address:: Palo Alto

State or Province of mailing address:: California

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94304